

Medication Safety

Standard 4



FACTSHEET



Clinical leaders and senior managers of a health service organisation implement systems to reduce the occurrence of medication incidents, and improve the safety and quality of medicine use. Clinicians and other members of the workforce use the systems to safely manage medicines.

Medicines are the most common treatment used in health care. Because they are so commonly used, medicines are associated with a higher incidence of errors and adverse events than other healthcare interventions. Many of these events are costly and potentially avoidable.

Medicines can relieve symptoms, improve the quality of people's lives and prevent, or cure, diseases. But there is also a risk associated with the use of medicines. This may occur because of errors in the delivery of medicines, such as the wrong medicine being prescribed or used, or the right medicine being used inappropriately. These types of errors are described as adverse drug or medicine events.

Many solutions to prevent adverse medicine events are found in standardisation and systemisation, or making things as routine and standard as possible. Other solutions for reducing medication errors include improving communication between clinicians, and between clinicians and patients; using technology to support the recording and transferring of information; and providing patient information and clinical decision support at the point of care.

The aim of this Standard is to ensure competent clinicians safely prescribe, dispense and administer appropriate medicines to patients informed about their medicines.



In brief, this Standard requires that:

- Health service organisations have mechanisms for the safe prescribing, dispensing, supplying, administering, storing, manufacturing, compounding and monitoring of the effects of medicine.
- The clinical workforce accurately records a patient's medication history and this history is available throughout the episode of care.
- The clinical workforce is supported for the prescribing, dispensing, administering, storing, manufacturing, compounding and monitoring of medicines.
- The clinician provides a complete list of patient's medicines to the receiving clinician and patient when handing over care or changing medicines.
- The clinical workforce informs patients about their options, risks and responsibilities for an agreed medication management plan.

Facts and Figures

Based on 2006–2007 hospital admissions data, it has been estimated there are approximately 190,000 medicine related hospital admissions in Australia each year with an estimated cost of \$660 million.¹

In 2005 the Australian Council on Safety and Quality in Health Care noted that 90 percent of safety problems are based in the system, and only 10 percent in the individual.²

Organisations therefore need to have an organisation-wide medication management system in place to reduce harm from medicines.

References

1. Roughead EE, Semple SJ. Medication safety in acute care in Australia: where are we now?. Part 1: a review of the extent and causes of medication problems 2002–2008 *ANZ Health Policy* 2009, 6:18.
2. Australian Council on Safety and Quality in Health Care. Achieving safety and quality improvements in health care. Sixth report to the Australian Health Ministers' Conference. Commonwealth of Australia, 2005. Available at: <http://www.safetyandquality.gov.au/internet/safety/publishing.nsf/Content/a-zpublicationsa-e>

What might a medication system developed in partnership with patients look like?

- The patient is provided with patient-specific medicines information that includes treatment options, benefits and associated risks
- The information provided to patients is in a format that meets their needs, and can be understood by the patient and their carers
- The medication management plan is discussed with the patient and the patient agrees to follow the plan

Further Information

A full copy of the Medication Safety Standard is contained in the *National Safety and Quality Health Service Standards*. It includes the criteria, items and actions required for health services to meet this Standard and is available on the Commission's website at www.safetyandquality.gov.au.

Resources and Tools

The Commission has the following tools and resources to assist with the implementation of this Standard:

- National Inpatient Medication Chart and support materials
- National Terminology, Abbreviations and Symbols to be used in the Prescribing and Administering of Medicines in Australian Hospitals
- National Medication Management Plan and support materials
- National Recommendations for User-applied Labelling of Injectable Medicines, Fluids and Lines
- National Tallman Lettering List
- Medication Safety Alerts.

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